

[illegible]

(Assistant Examiner) (Date)

Kevin T. Truong

Total Claims Allowed: 21

O.G.
Print Claim(s)

O.G.
Print Fig.

1

1A, 1B

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | <input type="checkbox"/> CPA | <input type="checkbox"/> T.D. | <input type="checkbox"/> R.1.47 | | | | |
|--|------------------------------|-------------------------------|---------------------------------|-----|-----|-----|-----|
| Final Original | | Final Original | Final Original | | | | |
| 1 | (1) | 31 | 61 | 91 | 121 | 151 | 181 |
| 2 | 2 | 32 | 62 | 92 | 122 | 152 | 182 |
| 3 | 3 | 33 | 63 | 93 | 123 | 153 | 183 |
| 4 | 4 | 34 | 64 | 94 | 124 | 154 | 184 |
| 5 | 5 | 35 | 65 | 95 | 125 | 155 | 185 |
| 6 | 6 | 36 | 66 | 96 | 126 | 156 | 186 |
| 7 | 7 | 37 | 67 | 97 | 127 | 157 | 187 |
| 8 | 8 | 38 | 68 | 98 | 128 | 158 | 188 |
| 9 | 9 | 39 | 69 | 99 | 129 | 159 | 189 |
| | 10 | 40 | 70 | 100 | 130 | 160 | 190 |
| | 11 | 41 | 71 | 101 | 131 | 161 | 191 |
| | 12 | 42 | 72 | 102 | 132 | 162 | 192 |
| 10 | (13) | 43 | 73 | 103 | 133 | 163 | 193 |
| 11 | 14 | 44 | 74 | 104 | 134 | 164 | 194 |
| 12 | 15 | 45 | 75 | 105 | 135 | 165 | 195 |
| | 16 | 46 | 76 | 106 | 136 | 166 | 196 |
| 13 | (17) | 47 | 77 | 107 | 137 | 167 | 197 |
| | 18 | 48 | 78 | 108 | 138 | 168 | 198 |
| 15 | 19 | 49 | 79 | 109 | 139 | 169 | 199 |
| 16 | 20 | 50 | 80 | 110 | 140 | 170 | 200 |
| 17 | 21 | 51 | 81 | 111 | 141 | 171 | 201 |
| 18 | 22 | 52 | 82 | 112 | 142 | 172 | 202 |
| 19 | 23 | 53 | 83 | 113 | 143 | 173 | 203 |
| 20 | 24 | 54 | 84 | 114 | 144 | 174 | 204 |
| 21 | 25 | 55 | 85 | 115 | 145 | 175 | 205 |
| | 26 | 56 | 86 | 116 | 146 | 176 | 206 |
| | 27 | 57 | 87 | 117 | 147 | 177 | 207 |
| | 28 | 58 | 88 | 118 | 148 | 178 | 208 |
| | 29 | 59 | 89 | 119 | 149 | 179 | 209 |
| | 30 | 60 | 90 | 120 | 150 | 180 | 210 |